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8**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

19

Application Number

10/629,516

Filing Date

July 29, 2003

First Named Inventor

Arnold Horwitz

Art Unit

1653

Examiner Name

Rita Mitra

Attorney Docket Number

11037US04/200-83.P1.C2

ENCLOSURES (check all that apply)☒ Fee Transmittal Form☐ Fee Attached☒ Amendment/Reply☐ After Final☐ Affidavits/declaration(s)☒ Extension of Time Request☐ Express Abandonment Request☐ Information Disclosure
Statement☐ Certified Copy of Priority
Document(s)☐ Reply to Missing Parts/
Incomplete Application☐ Reply to Missing Parts under
37 CFR 1.52 or 1.53☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a
Provisional Application☐ Power of Attorney, Revocation
Change of Correspondence
Address☒ Terminal Disclaimer☐ Request for Refund☐ CD Number of CD(s) _____☐ Landscape Table on CD☐ After Allowance Communication
to TC☐ Appeal Communication to Board
of Appeals and Interferences☐ Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☒ Return-Receipt Postcard☐ Other Enclosure(s) (please
identify below):

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENTFirm
or

Individual Name

McAndrews Held & Malloy, Ltd.

Name (Print/type)

Michael B. Harlin

Registration No. (Attorney/Agent)

43,658

Signature

Michael B. Harlin

Date: March 16, 2006

EXPRESS MAIL DEPOSIT

"Express Mail" mailing label number : EV726716344US

Date of Deposit March 16, 2006.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the consolidated Appropriates Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
for FY 2006

I am claiming small entity status. See 37 CFR 1.27

Complete if Known

Application Number	10/629,516
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First Named Inventor	Arnold Horwitz
Examiner Name	Rita Mitra
Art Unit	1653
Attorney Docket No.	11037US04/200-83.P1.C2

TOTAL AMOUNT OF PAYMENT (\$) 125.00**METHOD OF PAYMENT** (check all that apply)
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy

For the above-identified deposit account, the Director is hereby authorized to (check all that apply)

☒ Charge Fee(s) indicated below ☐ Charge Fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fees(s) ☒ Credit any overpayments
under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid(\$)
	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

	Small Entity Fee(\$)	Fee(\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee(\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee	Fee Paid (\$)
-20 or HP	x	=				

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee(\$)	Fee Paid (\$)
-3 or HP	x	=	

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee(\$)	Fee Paid(\$)
-100	/50	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):	Petition for a One Month Extension of Time (\$60.00) and Terminal Disclaimer (\$65.00)	125.00
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SUBMITTED BY

Signature	<u>Michael B. Harlin</u>	Registration No. (Attorney/Agent)	43,658	Telephone	(312)775-8000
Name (print/type)	Michael B. Harlin	Date	March 16, 2006		